California Sudden Infant Death Syndrome Program

FEDERAL AND CALIFORNIA SIDS LEGISLATION

As early as the 1950s some researchers were interested in the phenomenon of "crib death," but it was not until the 1960s that an organized effort began to address Sudden Infant Death Syndrome (SIDS). SIDS was first defined as a distinct medical entity in 1969. Federal hearings were held during 1972 and 1973 regarding SIDS.

In the United States, the Sudden Infant Death Syndrome Act of 1974 (Public Health Law 93-270) authorized the disbursement of federal grant dollars and set the conditions for the development of information and counseling services in each state. When separate SIDS grant monies were discontinued, the SIDS project was incorporated into the Maternal and Child Health (MCH) Block Grant.

In many states, including California, there was a growing public and legislative concern about the impact of SIDS on parents, caregivers and emergency medical personnel as well as first responders experiencing a SIDS death. SIDS parents and community groups throughout the State expressed the need for better communication and coordination between public health professionals, emergency and law enforcement personnel, and other persons who interact with SIDS families in California.

In response to these concerns, Governor George Deukemejian signed the first of four bills into law in 1989, which increased funding for expansion of the SIDS Program to include education, support services, training of professionals and paraprofessionals and appropriate counseling for SIDS parents and caregivers.

- Chapter 1111, Statutes of 1989 (SB 1067) mandates Sudden Infant Death Syndrome (SIDS) training for certification of emergency first responders (emergency medical technicians/paramedics and authorized registered nurses, firefighters and peace officers).
- Chapter 1118, Statutes of 1989 (SB 1068) mandates the State to provide regular and ongoing educational and training programs as well as produce, update and distribute literature on SIDS for specific target populations of persons who interact with parents and caregivers following a SIDS death. This statute also requires monitoring to determine whether the county health officer is performing the duties required under the existing law and within the time frames specified in Section 462.1 of the Health and Safety Code.
- Chapter 955, Statutes of 1989 (SB 1069) mandates the California Department of Public Health to establish procedures and protocols for researchers to access tissue, other materials, and data. This statute also requires that a standardized protocol be developed for coroners when conducting an autopsy on suspected SIDS cases and indemnifies coroners/ medical examiners complying with the protocol. When findings are consistent with SIDS, this must be stated on the death certificate. Legislation also provides for reimbursement of expenses associated with these statutory procedures.*

- Chapter 1112, Statutes of 1989 (SB 1070) established a State SIDS Advisory Council to provide guidance to the California Department of Public Health in the development of training, educational, and research programs regarding SIDS and to provide ongoing guidance to the Governor and the Legislature on SIDS Program needs for specific target groups. A statewide annual conference is to be convened to provide SIDS education.
- Statute of 1991 (SB362) amended the Health and Safety Code to state that the designated agent of the health officer shall be a "public health nurse or social worker who is knowledgeable about the incidence of Sudden Infant Death Syndrome, and the care and support of persons who have experienced a death of this nature and who has basic counseling skills." This legislation also requires contact with the person or persons who had custody and control of the child, including foster parents and childcare providers, within three working days of notification by the coroner or other reporting agent. In April, 1993 legislation was passed (Chapter 268) resulting in reimbursement by County Health Departments for costs associated with fulfilling these mandates.*
- Health and Safety Code, Sections 1254.6 and 1596.846 (AB 757) amended current legislation to require hospitals or midwives as of July 1, 1998 to provide SIDS risk reduction information as approved by the California Department of Public Health to parents/guardians of newborns. The State Department of Social Services is further mandated to provide information/instructional materials concerning SIDS and reducing the risk of SIDS to licensed child care facilities caring for children under two years of age upon licensure and at the time of a site visit.
- Assembly Bill 1225 (Chapter 457) effective January 1, 1999, amends existing law, which requires a mandatory autopsy in any case where an infant has died suddenly and unexpectedly, except when the physician of record certifies the cause of death is SIDS and the parents object to autopsy on religious or ethical grounds. AB 1225 revises this exception, and provides that an autopsy may be performed at the discretion of the coroner, even if the attending physician wants to certify the cause of death as SIDS.



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^{*} Note: In Fiscal Year 2002/2003, the Legislature suspended funding for mandate reimbursement of SIDS services provided by local coroners/medical examiners and health departments. Since then suspension of funding has continued as part of the State's annual budget bill; however the SIDS mandates requiring duty performance remain in effect.